



TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	09/855,320
		Filing Date	May 14, 2001
		First Named Inventor	Bayer, Robert J.
		Art Unit	1652
		Examiner Name	Rao, Manjunath N.
Total Number of Pages in This Submission		Attorney Docket Number	40853-01-5108-US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) <i>(please identify below)</i>
Remarks		The Commissioner is authorized to charge any additional fees to Deposit Account 50-0310.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual	Morgan, Lewis & Bockius LLP Todd Esker	Reg. No. 46,690
Signature		
Date	June 18, 2007	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	Kathryn A. Degliantoni	
Signature		Date June 18, 2007

FEE TRANSMITTAL for FY 2006

Effective 10/01/2003, Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 510

Complete if Known

Application Number 09/855,320
 Filing Date May 14, 2001
 First Named Inventor Bayer, Robert J.
 Examiner Name Rao, Manjunath N.
 Art Unit 1652
 Attorney Docket No. 40853-01-5108-US

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None☒ Deposit AccountDeposit
Account
Number

50-0310

Deposit
Account
Name

Morgan, Lewis & Bockius LLP

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1011	300	2011	150	Utility filing fee	
	N/A	4011	75	E-file Utility filing fee	
1002	350	2002	175	Design filing fee	
1003	550	2003	275	Plant filing fee	
1004	790	2004	395	Reissue filing fee	
1005	200	2005	100	Provisional filing fee	
1111	500	2111	250	Utility Search Fee	
13411	200	2311	100	Utility Examination Fee	
SUBTOTAL (1)					\$

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20 =	X	
Multiple Dependent Claims	-3 =	X	
		X	

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2203	180	Multiple dependent claim, if not paid over original patent
1204	88	2204	44	** Reissue independent claims in excess of 20 and over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)				\$

**or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large	Entity	Small	Entity	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65			Surcharge - late filing fee or oath	
1052	50	2052	25			Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130			Non-English specification	
1812	2,520	1812	2,520			For filing a request for reexamination	
1804	920*	1804	920*			Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*			Requesting publication of SIR after Examiner action	
1251	120	2251	60			Extension for reply within first month	
1252	450	2252	225				
1253	1,020	2253	510			Extension for reply within third month	510
1254	1,590	2254	795			Extension for reply within fourth month	
1255	2,160	2255	1,080			Extension for reply within fifth month	
1401	500	2401	250			Notice of Appeal	
1402	500	2402	250			Filing a brief in support of an appeal	
1403	1,000	2403	500			Request for oral hearing	
1451	1,510	1451	1,510			Petition to institute a public use proceeding	
1452	500	2452	250			Petition to revive - unavoidable	
1453	1,500	2453	750			Petition to revive - unintentional	
1501	1,400	2501	700			Utility issue fee (or reissue)	
1502	800	2502	400			Design issue fee	
1503	1,100	2503	550			Plant issue fee	
1460	130	1460	130			Petitions to the Commissioner	
1807	50	1807	50			Petitions related to provisional applications	
1806	180	1806	180			Submission of Information Disclosure Stmt	
8021	40	8021	40			Recording each patent assignment per property (times number of properties)	
1809	790	2809	395			Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395			For each additional invention to be examined (37 CFR § 1.129(b))	
1801	790	2801	395			Request for Continued Examination (RCE)	
1802	900	1802	900			Request for expedited examination of a design application	
1081	250	2081	125			Utility Application Size Fee - for each additional 50 sheets that exceeds 100 sheets	
Other fee (specify) _____							
*Reduced by Basic Filing Fee Paid							
SUBTOTAL (3)							\$510

SUBMITTED BY

Name (Print/Type) Todd Esker

Registration No. (Attorney/Agent) 46,590

Signature

Telephone (415) 442-1000

Date June 18, 2007